

<h1>TRANSMITTAL FORM</h1> <p><i>(to be used for all correspondence after initial filing)</i></p>		Application Number	10/516,899-Conf. #1565
		Filing Date	December 3, 2004
		First Named Inventor	Jay M. Meythaler
		Art Unit	1651
		Examiner Name	R. A. Davis
Total Number of Pages in This Submission	3	Attorney Docket Number	UAB-20802/22

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Restriction Requirement
<div style="border: 1px solid black; padding: 5px; min-height: 100px;"> Remarks </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	GIFFORD, KRASS, SPRINKLE, ANDERSON & CITKOWSKI, P.C.		
Signature	/Avery N. Goldstein, Ph.D./		
Printed name	Avery N. Goldstein, Ph.D.		
Date	April 15, 2008	Reg. No.	39,204

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2008</h3>		Complete if Known Application Number 10/516,899-Conf. #1565 Filing Date December 3, 2004 First Named Inventor Jay M. Meythaler Examiner Name R. A. Davis Art Unit 1651 Attorney Docket No. UAB-20802/22	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	230.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	<input type="checkbox"/> Deposit Account Deposit Account Number: 07-1180 Deposit Account Name: Gifford, Krass, Sprinkle, Anderson & Cikowski, P.C.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION																					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																					
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)														
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)															
Utility	310	155	510	255	210	105															
Design	210	105	100	50	130	65															
Plant	210	105	310	155	160	80															
Reissue	310	155	510	255	620	310															
Provisional	210	105	0	0	0	0															
2. EXCESS CLAIM FEES																					
						<table border="1"> <tr> <th></th> <th>Small Entity Fee (\$)</th> </tr> <tr> <td>Each claim over 20 (including Reissues)</td> <td>50</td> </tr> <tr> <td>Each independent claim over 3 (including Reissues)</td> <td>210</td> </tr> <tr> <td>Multiple dependent claims</td> <td>370</td> </tr> </table>			Small Entity Fee (\$)	Each claim over 20 (including Reissues)	50	Each independent claim over 3 (including Reissues)	210	Multiple dependent claims	370						
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Fee (\$)	Fee Paid (\$)																				
_____	_____																				
HP = highest number of total claims paid for, if greater than 20. <table border="1"> <tr> <th>Indep. Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>_____ - 3 = _____</td> <td>x _____</td> <td>= _____</td> <td></td> </tr> </table>						Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	_____ - 3 = _____	x _____	= _____		HP = highest number of independent claims paid for, if greater than 3.							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)																		
_____ - 3 = _____	x _____	= _____																			
3. APPLICATION SIZE FEE																					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																					
<table border="1"> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> <tr> <td>_____ - 100 = _____</td> <td>/50 = _____</td> <td>(round up to a whole number) x _____</td> <td>= _____</td> <td></td> </tr> </table>								Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____	= _____					
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)																	
_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____	= _____																		
4. OTHER FEE(S)																					
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)															
Other (e.g., late filing surcharge): 2252 Extension for response within second month						230.00															

SUBMITTED BY			
Signature	/Avery N. Goldstein, Ph.D./	Registration No. (Attorney/Agent)	39,204
Name (Print/Type)	Avery N. Goldstein, Ph.D.	Telephone	(248) 647-6000
		Date	April 15, 2008